

Foster Family Home - Corrective Action Report

Provider ID: 1-110081

Home Name: Eliel Corpuz, CNA

6204 Ibis Avenue

Ewa Beach

HI 96706

Review ID: 1-110081-9

Reviewer: Jackie Chamberlain

Begin Date: 10/28/2019

Foster Family Home

Required Certificate

[11-800-6]

6.(d)(1) Comply with all applicable requirements in this chapter; and

Comment:

by inspection
Home visit made for a 3 bed recertification. Corrective action report issued during home visit with corrective action plan due to CTA on 11/28/19

Foster Family Home

Personnel and Staffing

[11-800-41]

41.(b)(7) I have a current tuberculosis clearance that meets department guidelines; and

Comment:

41.(b)(7) Have a current tuberculosis clearance that meets department guidelines CG # 1 [REDACTED] CG # 2 [REDACTED]
CG # 3 [REDACTED] no current proof of current TB clearance

Foster Family Home

Fire Safety

[11-800-46]

46.(b)(2) All caregivers have been trained to implement appropriate emergency procedures in the event of a fire.

Comment:

46.(b)(2) All caregivers have been trained to implement appropriate emergency procedures in the event of a fire.
last proof of fire drill was 11/2018

Foster Family Home

Client Rights

[11-800-53]

53.(b)(15) Have daily visiting hours and provisions for privacy established;

Comment:

53.(b)(15) Have daily visiting hours and provisions for privacy established; No current written visiting hour statement although PCG verbally states 24/7

Foster Family Home

Records

[11-800-54]

54.(c)(5) Medication schedule checklist;

Comment:

54.(c)(5) Medication schedule checklist; no daily medication log for client # 1 [REDACTED]

Jackie Chamberlain
Compliance Manager

[Signature]
Primary Care Giver

10/28/19
Date

10/28/19
Date

Community Care Foster Family Home (CCFFH)
Written Plan of Correction for Deficiencies
Listed in Corrective Action Report
Chapter 17-1454

CCFFH Name: **Eliel Corpuz, CNA**

CCFFH Address: **6204 Ibis Avenue Ewa Beach HI**

Rule Number	Corrective Action Taken	Date Corrected	Prevention Strategy
41 (b) 7	FOUND TB CLEARANCES FOR CG#1 & CG#2, NOW IN THE HOME BINDER TB CLEARANCE FOR CG#3 HAS BEEN SUBMITTED AND NOW IN HOME BINDER	10/28/19 10/30/19	HOME WILL USE A CALENDAR TO MONITOR DUE DATES OF CERTIFICATES, TO PREVENT FUTURE LAPSES
46 b (2)	ALL SCG's SHALL BE INSTRUCTED TO LEAD FIRE DRILLS (AT LEAST ONCE A YEAR), FOR EVERY SG.	10/28/19	ALL CG's SHALL LEAD, DOCUMENT AND SIGN (AT LEAST ONCE A YEAR) A FIRE DRILL. NOTED AND SUPERVISED BY THE PCG.
53 (b) (15)	VISITING HOURS SHALL BE PLACED IN THE HOME BINDER, AND ALSO POSTED.	10/28/19	A WRITTEN HOUSE VISITING HOURS SHALL BE IN THE BINDER AND ALSO POSTED ON THE WALL
54 (c) (5)	MEDICATION ADMINISTRATION RECORD FOR CLIENT #1 IS NOW IN THE CLIENT'S RECORDS BOOK	10/28/19	THE MEDICATION ADMINISTRATION RECORD, SHALL BE RETURNED TO THE PATIENT BINDER EVERYDAY

Primary Caregiver's Signature: _____

Print Name: ELIEL CORPUZ

Date of Signature: 26 Nov '19